Case 21-19595-ABA Doc 61 Filed 05/13/25 Entered 05/13/25 16:12:25 Desc Main 5/13/25 4:10PM

		Docume	ii Page I 0i 10	
Fill in this info	ormation to identify your	case:		
Debtor 1	Michael David Ra	ymond		
	First Name	Middle Name	Last Name	
Debtor 2	Cheryl Lynn Rayı	mond		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the:	DISTRICT OF NEW JER	SEY	
Case number	21-19595			
(if known)				Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct y

Par	1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	189,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	154,139.69
	1c. Copy line 63, Total of all property on Schedule A/B	\$	343,139.69
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	171,377.01
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,851.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	105,709.88
	Your total liabilities	\$	278,937.89
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,405.14
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,108.21
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	personal,	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and s	ubmit this form to

the court with your other schedules.

Case 21-19595-ABA Doc 61 Filed 05/13/25 Entered 05/13/25 16:12:25 Desc Main Document Page 2 of 16

Debtor 1 Michael David Raymond
Cheryl Lynn Raymond

Case number (if known) 21-19595

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,553.60

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,851.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	1,851.00

Case 21-19595-ABA Doc 61 Filed 05/13/25 Entered 05/13/25 16:12:25 Desc Main Document Page 3 of 16 5/13/25 4:10PM

Debtor 1	Michael David Ra	aymond		
	First Name	Middle Name	Last Name	
Debtor 2	Cheryl Lynn Ray	mond		
Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

No. Go to Part 2.		uitable interest in a	any resic	lence, building, land, or similar property?		
Yes. Where is the pro	pperty?					
302 Folsom Ave Street address, if available		cription	Wha	single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured c the amount of any secure Creditors Who Have Cla	ed claims on Ś <i>chedule</i>
Egg Harbor Township	NJ State	08234-0000 ZIP Code		Manufactured or mobile home Land Investment property Timeshare	Current value of the entire property? \$189,000.00	Current value of the portion you own?
Atlantic			Who	Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	(such as fee simple, ter a life estate), if known.	
County				Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this iten erty identification number:	Check if this is cor (see instructions) n, such as local	nmunity property

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Case 21-19595-ABA Doc 61 Filed 05/13/25 Entered 05/13/25 16:12:25 Desc Main Document Page 4 of 16

Debte Debte		Michael Davi Cheryl Lynn			Case number (if known)	21-19595
3. Ca	rs, vans	s, trucks, tracto	ors, sport utility ve	hicles, motorcycles		
	No					
■ .	Yes					
3.1		Ford F250 XL 2015 imate mileage: nformation:	91,565	Who has an interest in the property? Check one ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	the amount of any Creditors Who Ha Current value of tentire property?	portion you own?
				Check if this is community property (see instructions)	\$19,056	5.00 \$19,056.00
3.2		Toyota Yaris Sed 2009 imate mileage: nformation:	an 108,376	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	the amount of any	ured claims or exemptions. Put secured claims on <i>Schedule D:</i> ve Claims Secured by Property. the Current value of the portion you own?
				☐ Check if this is community property (see instructions)	\$2,684	\$2,684.00
3.3		Ford Escape 2020 imate mileage:	23,362	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property. the Current value of the portion you own?
				☐ Check if this is community property (see instructions)	\$23,000	\$23,000.00
Exa ■	amples: I			d other recreational vehicles, other vehicles tercraft, fishing vessels, snowmobiles, motorcy		
				n for all of your entries from Part 2, includin		\$44,740.00
Part 3	Descr	ribe Your Persor	nal and Household Ite	ems		
Do y	ou own	or have any le	gal or equitable inf	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i> >	<i>(amples.</i> No		urnishings ces, furniture, linens	china, kitchenware		
	Yes. D	escribe				
			Debtor's person	al household goods/furnishings		\$2,000.00

Filed 05/13/25 Entered 05/13/25 16:12:25 Case 21-19595-ABA Doc 61 Desc Main Page 5 of 16 5/13/25 4:10PM Document Michael David Raymond Debtor 1 21-19595 Debtor 2 Cheryl Lynn Raymond Case number (if known) 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$800.00 Family electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☐ No Yes. Describe..... \$200.00 Clarinet, flute, keyboard & a bells set Glock 9mm. Springfield .45. jamdgim 380, muzzle leader, shot gun \$600.00 (12 ga) & a rugger 10/22 Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$400.00 Debtor's clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Yes. Describe..... \$500.00 **Jewelry**

13. Non-farm animals

Examples: Dogs, cats, birds, horses

■ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$4,500.00

Case 21-19595-ABA Doc 61 Filed 05/13/25 Entered 05/13/25 16:12:25 Desc Main Document Page 6 of 16

		Duce	illelit Page 0 01 10		
Debtor 1 Debtor 2	Michael David Raymond Cheryl Lynn Raymond			Case number (if known)	21-19595
Part 4: Do	escribe Your Financial Assets				
	wn or have any legal or equitable	e interest in any c	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	aples: Money you have in your wall	•	·	when you file your petition	on
Exam	sits of money iples: Checking, savings, or other fi institutions. If you have multi		certificates of deposit; shares in c	redit unions, brokerage h	ouses, and other similar
□ No ■ Yes			Institution name:		
	17.1. Chec	king	TD Bank account ending: 4	882	\$3,055.68
Exam	s, mutual funds, or publicly trade aples: Bond funds, investment acco		,		
	Crypto	o.com			\$0.02
	Fidelit	y with 00.00 va	lue at present (account endi	ng: 2035)	\$0.00
				<u> </u>	<u>-</u>
	Roinh	ood			\$4.72
	publicly traded stock and interest venture	ts in incorporated	and unincorporated businesse	es, including an interes	t in an LLC, partnership, and
	. Give specific information about the	nem			
	Name of er	ntity:		% of ownership:	
Nego Non-i	rnment and corporate bonds and tiable instruments include personal negotiable instruments are those yo	checks, cashiers'	checks, promissory notes, and me	oney orders.	
■ No □ Yes	. Give specific information about th Issuer nam				
Exam □ No	ment or pension accounts uples: Interests in IRA, ERISA, Keo	gh, 401(k), 403(b),	thrift savings accounts, or other p	pension or profit-sharing	olans
■ Yes	. List each account separately. Type of accou	ınt:	Institution name:		
	401K savin	gs plan	IGT 401K retirement saving	ıs plan	\$13,654.27
Your	ity deposits and prepayments share of all unused deposits you ha aples: Agreements with landlords, p				ies, or others

	-				-	
■ No						
☐ Yes			Ir	nstitution	name or ir	ndividual:

Case 21-19595-ABA Doc 61 Filed 05/13/25 Entered 05/13/25 16:12:25 Desc Main

Document Page 7 of 16

	ebtor 1 ebtor 2	Michael D Cheryl Ly				micht ray		Case number (if known)	21-1959	95
23.	Annuitie ■ No	es (A contrac	ct for a per	iodic paymer	nt of money to yo	ou, either for life o	r for a number	of years)		
	☐ Yes		Issuer na	ime and desc	cription.					
24.		s in an educa c. §§ 530(b)(1				d ABLE program	ı, or under a qı	ualified state tuition pro	ogram.	
	☐ Yes		Institution	n name and o	lescription. Sepa	arately file the reco	ords of any inte	erests.11 U.S.C. § 521(c)	:	
25.	Trusts, ∈	equitable or	r future in	terests in pr	operty (other th	han anything liste	ed in line 1), a	nd rights or powers ex	ercisable f	or your benefit
	☐ Yes. 0	Give specific	c informatio	n about then	١					
	Exampl ■ No	les: Internet o	domain na	mes, website	s, proceeds fror	er intellectual prom royalties and lice		ents		
	☐ Yes. (Give specific	c informatio	n about then	າ					
	Exampl ■ No		permits, ex	clusive licen	ses, cooperative	e association holdi	ings, liquor lice	nses, professional licens	ses	
		Give specific			٦					
M	oney or p	roperty owe	ed to you?						porti Do n	ent value of the on you own? ot deduct secured as or exemptions.
28.	Tax refu	unds owed to	to you							
	■ No □ Yes. G	Give specific	informatio	n about them	, including whet	her you already file	ed the returns a	and the tax years		
29.	Family s Exampl ■ No		e or lump s	um alimony,	spousal support	i, child support, ma	aintenance, div	orce settlement, property	/ settlemen	t
	_	Give specific	informatio	n						
30.	Exampl _		wages, disa	ability insurar	nce payments, d e to someone el		sick pay, vacati	on pay, workers' compe	ensation, Sc	ocial Security
	■ No □ Yes. 0	Give specific	c informatio	on						
31.		s in insuran les: Health, d			ce; health saving	gs account (HSA);	credit, homeov	wner's, or renter's insura	nce	
	■ No	Jame the inc	curance co	mpany of ear	ch policy and list	tite value				
	L Tes. N	vame me ms		company nan		itis value.	Benefic	iary:	Sur valu	render or refund ue:
32.	If you a				rom someone v kpect proceeds f		ce policy, or are	e currently entitled to rec	eive prope	rty because
	■ No □ Yes. 0	Give specific	c informatio	n						
33.	Exampl □ No		ts, employr	nent dispute:		led a lawsuit or m ms, or rights to su		d for payment		

Michael David Raymond Debtor 1 Debtor 2 **Cheryl Lynn Raymond**

Case number (if known) 21-19595

Workers compensation claim pending - represented by the Diego Law Firm, 129 South Main Street, Pleasantville, NJ 08232 CP#: 2015-9313 - this is a reopening of a previous w/c matter for a low back injury case. The case has settled for \$54,720.00 and Debtor's net award totals: \$50,323.00.

\$54,720.00

Post-petition workers compensation claim - represented by the Diego Law Firm, 129 South Main Street, Pleasantville, NJ 08232 CP#: 2015-9313 - DOA: Januaary 10, 2024 work related accident. Debtor has a post-petion worker's compensation claim which has settled as follows: 17.5 % of partial total partial permanent disability in reference to the pelvis secondary to a left proximal leg strain injury with findings of a left proximal hamstring rupture. Permanent: 105 weeks at \$318.72 = \$ 33,465.00. Debtor recieved a lump sum payment of \$17,221.00. The remaining settlement will be paid over the next 10 months beginning oon or about June 01, 2025 @ \$1,274.88 per month for 10 months.

\$33,465.00

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to ■ No	o set off claims
☐ Yes. Describe each claim	
35. Any financial assets you did not already list ■ No	
☐ Yes. Give specific information	
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$104,899.69
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you own or have any legal or equitable interest in any business-related property?	
No. Go to Part 6.	
☐ Yes. Go to line 38.	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
No. Go to Part 7.	
☐ Yes. Go to line 47.	
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership	
■ No	
☐ Yes. Give specific information	
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00

Case 21-19595-ABA Doc 61 Filed 05/13/25 Entered 05/13/25 16:12:25 Desc Main Document Page 9 of 16 5/13/25 4:10PM

Michael David Raymond

Debtor 1

Deb	otor 2 Cheryl Lynn Raymond			Case number (if known)	21-19595	
Part	8: List the Totals of Each Part of this Form					
55.	Part 1: Total real estate, line 2					\$189,000.00
56.	Part 2: Total vehicles, line 5	_	\$44,740.00			
57.	Part 3: Total personal and household items, line 15	_	\$4,500.00			
58.	Part 4: Total financial assets, line 36	_	\$104,899.69			
59.	Part 5: Total business-related property, line 45		\$0.00			
60.	Part 6: Total farm- and fishing-related property, line 52	_	\$0.00			
61.	Part 7: Total other property not listed, line 54	+_	\$0.00			
62.	Total personal property. Add lines 56 through 61	_	\$154,139.69	Copy personal property to	otal	\$154,139.69
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$	343,139.69

		Doddinent	r age to or to
Fill in this info	rmation to identify your	case:	
Debtor 1	Michael David Ra	ymond	
	First Name	Middle Name	Last Name
Debtor 2	Cheryl Lynn Rayr	nond	
(Spouse if, filing)	First Name	Middle Name	Last Name
United States B	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY	
Case number	21-19595		
(if known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	It 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming?	? Check one only, eve	n if yo	ur spouse is filing with you.	
	☐ You are claiming state and federal nonbank	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	302 Folsom Avenue Egg Harbor Township, NJ 08234 Atlantic County	\$189,000.00		\$50,300.00	11 U.S.C. § 522(d)(1)
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	2015 Ford F250 XL 91,565 miles	\$19,056.00		\$1,850.00	11 U.S.C. § 522(d)(5)
	Line from Scriedule AVB. 3.1			100% of fair market value, up to any applicable statutory limit	
	Debtor's personal household goods/furnishings	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	Family electronics Line from Schedule A/B: 7.1	\$800.00		\$800.00	11 U.S.C. § 522(d)(3)
	Line Irom Schedule AVB. 1-1			100% of fair market value, up to any applicable statutory limit	
	Clarinet, flute, keyboard & a bells set Line from Schedule A/B: 9.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(5)
	LINE HOTH SCHEUUIE AVD. 3.1			100% of fair market value, up to any applicable statutory limit	

Case 21-19595-ABA Doc 61 Filed 05/13/25 Entered 05/13/25 16:12:25 Desc Main Document Page 11 of 16 $^{5/13/25}$ 4:10PM

		hael David Raymond ryl Lynn Raymond			Case number (if known)	21-19595
		ption of the property and line on //B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Concadio 7	2 max note and property	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
		nm. Springfield .45. jamdgim	\$600.00		\$600.00	11 U.S.C. § 522(d)(5)
	& a rugge	zle leader, shot gun (12 ga) er 10/22			100% of fair market value, up to	
	Line from S	Schedule A/B: 9.2			any applicable statutory limit	
	Debtor's	clothing Schedule A/B: 11.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)
					100% of fair market value, up to any applicable statutory limit	
	Jewelry	Schedule A/B: 12.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(4)
					100% of fair market value, up to any applicable statutory limit	
		ings plan: IGT 401K nt savings plan	\$13,654.27		\$13,654.27	11 U.S.C. § 522(d)(10)(E)
		Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
		compensation claim - represented by the Diego	\$54,720.00		\$54,720.00	11 U.S.C. § 522(d)(10)(C)
	Law Firm Pleasanty 2015-931 previous injury cas \$54,720.0	n, 129 South Main Street, ville, NJ 08232 CP#: 3 - this is a reopening of a w/c matter for a low back se. The case has settled for 0 and Debtor Schedule A/B: 33.1			100% of fair market value, up to any applicable statutory limit	
		tion workers compensation presented by the Diego Law	\$33,465.00		\$33,465.00	11 U.S.C. § 522(d)(11)(E)
	Pleasante 2015-931 work rela post-peti claim wh	ville, NJ 08232 CP#: 3 - DOA: Januaary 10, 2024 ted accident. Debtor has a on worker's compensation ich has set Schedule A/B: 33.2			100% of fair market value, up to any applicable statutory limit	
3.	•	aiming a homestead exemption of adjustment on 4/01/28 and every 3			iled on or after the date of adjustmen	t.)
	■ No					
			ed by the exemption w	ithin 1	,215 days before you filed this case?	
		No Yes				
		100				

Fill in this informati	on to identify your case:	
Debtor 1	Michael David Raymond	
Debtor 2 (Spouse, if filing)	Cheryl Lynn Raymond	
United States Bank	cruptcy Court for the: DISTRICT OF NEW JERSEY	
_	21-19595	Check if this is:
(If known)		An amended filing
		☐ A supplement showing postpetition chapter 13 income as of the following date:
Official For	m 106l	MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	tt 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filling spouse
	If you have more than one job,	Francisco estatua	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Slot Tech	Toddler teacher
	Include part-time, seasonal, or self-employed work.	Employer's name	IGT	Jewish Community Center of AC
	Occupation may include student or homemaker, if it applies.	Employer's address	403 West Coat Road Egg Harbor Township, NJ 08234	501 North Jerome Avenue Margate City, NJ 08402
		How long employed t	here? 23 yrs.	3 years
Pai	rt 2: Give Details About Mor	nthly Income		

Oive Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 6,522.92 \$ 3,960.67

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106l Schedule I: Your Income page 1

Case 21-19595-ABA Doc 61 Filed 05/13/25 Entered 05/13/25 16:12:25 Desc Main Document Page 13 of 16

Debt Debt		Michael David Raymond Cheryl Lynn Raymond		С	ase number (if I	nown)	21-1	9595		
				ì	For Debtor 1			Debtor		
	Cop	by line 4 here	4.		\$6,52	2.92	\$,960.67	
5.	List	all payroll deductions:								
-	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 90	2.66	\$		934.83	ì
	5b.	Mandatory contributions for retirement plans	5b.			5.34	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.			0.00	\$		0.00	
	5d.	Required repayments of retirement fund loans	5d.		\$	0.00	\$		0.00)
	5e.	Insurance	5e.		\$ 85	0.50	\$_		0.00)
	5f.	Domestic support obligations	5f.		. —	0.00	\$_		0.00	
	5g.	Union dues	5g.			0.00	\$_		0.00	_
	5h.	Other deductions. Specify:	5h.	.+		0.00	+ \$_		0.00)
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	(2,41	8.50	\$_		934.83	<u> </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	(\$4,10	4.42	\$_	3,	,025.84	<u> </u>
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	s, 8a.		\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b.		·	0.00	ς \$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a de regularly receive Include alimony, spousal support, child support, maintenance, divorsettlement, and property settlement.	ependent				*_ \$			_
	8d.	Unemployment compensation	8d.		·	0.00 0.00	\$ -		0.00	
	8e.	Social Security	8e.		·	0.00	\$-		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash a that you receive, such as food stamps (benefits under the Supplem Nutrition Assistance Program) or housing subsidies. Specify:	ssistance			0.00	\$		0.00	<u>-</u>
	8g.	Pension or retirement income	8g.			0.00	\$_		0.00)
	8h.	Other monthly income. Specify: Workers Compensation x months	10 8h.	.+	\$	0.00	+ \$_	1,	,274.88	3
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$_		1,274.8	88
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	4,104.42	+ \$	4,	300.72	= \$	8,405.14
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in sude contributions from an unmarried partner, members of your househer friends or relatives. In the include any amounts already included in lines 2-10 or amounts the ecify:	nold, your depe		, ,		,		e J. +\$	0.00
12.		d the amount in the last column of line 10 to the amount in line 11 te that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary</i> lies						12.	\$	8,405.14
13.	Do :	you expect an increase or decrease within the year after you file t No.	this form?						Combi	ined Ily income
		Yes. Explain: Co-Debtor has a post-petion worker's co partial total partial permanent disability in strain injury with findings of a left proximum \$ 33,465,00. Debtor recieved a lumn sum	n reference t nal hamstring	to ti g ru	he pelvis se upture. Per	cono mane	lary to ent: 1	o a left 05 wee	proxinks at \$	nal leg 318.72 =

Official Form 106l Schedule I: Your Income page 2

paid over the next 10 months.

Case 21-19595-ABA Doc 61 Filed 05/13/25 Entered 05/13/25 16:12:25 Desc Main Document Page 14 of 16

Fill in this	s information to identify y	our case:					
Debtor 1	Michael Da	vid Raym	ond		Che	eck if this is:	
						An amended filing	
Debtor 2 (Spouse, it	f filing) Cheryl Lynr	n Raymo	nd			A supplement shown 13 expenses as of	wing postpetition chapter the following date:
United Sta	ates Bankruptcy Court for th	e: DISTR	RICT OF NEW JERSEY			MM / DD / YYYY	
Case numl	ber 21-19595						
Offici	al Form 106J						
Sche	dule J: Your	Expe	nses				12/1
Be as co	mplete and accurate a	s possible eeded, att	e. If two married people ar ach another sheet to this				
Part 1:	Describe Your Hous	ehold					
	No. Go to line 2.						
	Yes. Does Debtor 2 live	in a sepa	rate household?				
	■ No	et file Offi	cial Form 106J-2, <i>Expenses</i>	s for Sanarata House	hold of De	htor 2	
2. Do v	you have dependents?	_	Siai i Oiiii 1005-2, <i>Expenses</i>	s for Separate Flouser	noid of De	biol 2.	
Do r	not list Debtor 1 and otor 2.	['] □ No ■ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
Do r	not state the						□ No
	endents names.			Daughter		18	■ Yes
				_			□ No
				Daughter		22	■ Yes
							□ No □ Yes
							☐ Yes
							☐ Yes
exp	your expenses include enses of people other rself and your depend	than 📮	■ No] Yes				
	s as of a date after the	our bank	nly Expenses ruptcy filing date unless y cy is filed. If this is a supp				
the value			n government assistance in cluded it on Schedule I: \			Your exp	enses
	rental or home owner ments and any rent for t		nses for your residence. I or lot.	nclude first mortgage	4.	\$	1,389.35
If no	ot included in line 4:						
4a.	Real estate taxes				4a.	\$	0.00
4b.	Property, homeowner	's or rente	er's insurance		4h	\$	0.00

50.00 0.00

0.00

4c. Home maintenance, repair, and upkeep expenses

Homeowner's association or condominium dues

Additional mortgage payments for your residence, such as home equity loans

Debtor	1 Michael David Raymond			
Debtor	2 Cheryl Lynn Raymond	Case num	ber (if known)	21-19595
-	ilities:	60	c	440.00
6a	<i>,,</i> ,	6a. 6b.	\$ \$	440.00
6b			\$	70.00
60		6c.	·	525.00
60 7 5 -		6d.	\$	0.00
	ood and housekeeping supplies	7.	*	1,000.00
-	nildcare and children's education costs	8.	\$	25.00
	othing, laundry, and dry cleaning	9.	\$	234.00
	ersonal care products and services	10.	\$	88.00
	edical and dental expenses	11.	\$	175.00
	ansportation. Include gas, maintenance, bus or train fare.	12.	\$	400.00
	onot include car payments. ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	
			·	50.00
	naritable contributions and religious donations	14.	\$	0.00
-	surance. o not include insurance deducted from your pay or included in lines 4 or 20.			
	ia. Life insurance	15a.	\$	0.00
	b. Health insurance	15b.	·	0.00
	ic. Vehicle insurance	15b.	·	
			· -	673.00
	d. Other insurance. Specify:	15d.	\$	0.00
	IXES. Do not include taxes deducted from your pay or included in lines 4 or 20. pecify:	16.	\$	0.00
17. In	stallment or lease payments:			
17	a. Car payments for Vehicle 1	17a.	\$	638.86
17	b. Car payments for Vehicle 2	17b.	\$	0.00
17	c. Other. Specify:	17c.	\$	0.00
	d. Other. Specify:	17d.	\$	0.00
	our payments of alimony, maintenance, and support that you did not report as		·	
de	educted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19. O 1	ther payments you make to support others who do not live with you.		\$	0.00
Sp	pecify:	19.		
	ther real property expenses not included in lines 4 or 5 of this form or on Sche			
20	a. Mortgages on other property	20a.	·	0.00
20	b. Real estate taxes	20b.	\$	0.00
20	c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20	d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20	e. Homeowner's association or condominium dues	20e.	\$	0.00
21. O 1	her: Specify: Misc:	21.	+\$	350.00
22. C a	alculate your monthly expenses			
	a. Add lines 4 through 21.		\$	6.108.21
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	c. Add line 22a and 22b. The result is your monthly expenses.		\$	6 409 24
22	c. Add line 22a and 22b. The result is your monthly expenses.		Ψ	6,108.21
	alculate your monthly net income.			
23	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	8,405.14
23	b. Copy your monthly expenses from line 22c above.	23b.	-\$	6,108.21
23	c. Subtract your monthly expenses from your monthly income.			0.000.00
	The result is your monthly net income.	23c.	\$	2,296.93
Fo	by you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect your odification to the terms of your mortgage? No.			ease or decrease because of a
	Vos Evolain here:			

	, , , , , , , , , , , , , , , , , , , ,
■ No.	
☐ Yes.	Explain here:

Fill in this info	rmation to identify your	case:	
Debtor 1	Michael David Ra	<i></i>	
	First Name	Middle Name	Last Name
Debtor 2	Cheryl Lynn Rayr	nond	
(Spouse if, filing)	First Name	Middle Name	Last Name
United States B	ankruptcy Court for the:	DISTRICT OF NEW JERSEY	
Case number	21-19595		
(if known)			
	21-19595		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Die	d you pay or agree to pay someone who is NOT an attorney	to help	you fill out bankruptcy forms?
	No		
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	der penalty of perjury, I declare that I have read the summar	v and s	
	t they are true and correct. /s/ Michael David Raymond Michael David Raymond Signature of Debtor 1	X	